

# NC MEDICAID

## County Playbook: NC Medicaid Managed Care Instructional Guide for DSS Guardians



NC DEPARTMENT OF  
**HEALTH AND  
HUMAN SERVICES**  
Division of Health Benefits

*Under NC Medicaid Managed Care, local Department of Social Services (DSS) Directors or the Directors' designees are responsible for enrolling beneficiaries for whom they have legal guardianship in a health plan. The guidance provided in this document is intended to help guardians make those enrollment decisions.*

***If the guardian does not choose a health plan for beneficiaries in their guardianship, they will be auto-enrolled in a health plan. The auto-enrollment process will consider the beneficiary's current medical services and providers.***

- *Exempt beneficiaries will stay in NC Medicaid Direct.*
- *Federally-recognized tribal members and IHS-eligible beneficiaries living in the 5-county region will be auto-enrolled in the EBCI Tribal Option.*

*More information regarding DSS duties as a disinterested public agent guardian can be found in the MA-2230 policy and the DAAS Guardianship Manual.*

Steps	<ol style="list-style-type: none"> <li>Develop and review the list of individuals with the Medicaid case manager to identify the beneficiaries who need to enroll in a health plan. <ul style="list-style-type: none"> <li>• <b>Mandatory:</b> Must enroll in a health plan</li> <li>• <b>Exempt:</b> May enroll in a health plan or stay in NC Medicaid Direct</li> <li>• <b>Excluded:</b> Cannot enroll in a health plan; stay in NC Medicaid Direct</li> <li>• <b>Tribal/IHS-Exempt:</b> May enroll in a health plan, including the EBCI Tribal Option, or stay in NC Medicaid Direct</li> <li>• <b>Tribal/IHS-Excluded:</b> May enroll in the EBCI Tribal Option or stay in NC Medicaid Direct</li> </ul> </li> <li>Confirm the DSS Director or Director's designee is listed as the authorized representative on the Person page of the Medicaid Case in NC FAST. This step is necessary to ensure that the Enrollment Broker can legally discuss the individual with the guardian. <ol style="list-style-type: none"> <li>Please work with DSS staff to ensure authorized representative details are entered according to authorized representative hierarchy policy in MA-2420/3430.</li> <li><b>NOTE:</b> Some DSS offices have contracts with corporations where the authorized representative is someone other than the DSS Director or Director's designee. If so, please share this instructional guide with those corporations.</li> </ol> </li> <li>Enroll the individual in a health plan in the following ways: 1) use the website or mobile app; 2) call 1-833-870-5500; or 3) fill out the enrollment form. Refer to the "Options to Enroll" section below. The beneficiary under guardianship should participate if possible.</li> </ol>
Considerations	<p>When selecting a health plan, consider the information below and discuss with the beneficiary when possible.</p> <ul style="list-style-type: none"> <li>• Does the health plan have providers near the individual's residence (not necessarily the DSS guardian's county)?</li> <li>• Does the health plan include the individual's current medical providers and/or specialists?</li> <li>• Which health plan, if any, has additional benefits that best meet the individual's needs? A list of added services can be found in the Health Plan Choice Guide on <a href="https://ncmedicaidplans.gov">ncmedicaidplans.gov</a>.</li> <li>• Is the individual identified as mandatory, but believes that they should continue to receive services related to intellectual or developmental disability (I/DD), behavioral health, traumatic brain injury, or substance use disorder? If so, use the Request to stay in NC Medicaid Direct and LME-MCO: Beneficiary form on <a href="https://ncmedicaidplans.gov">ncmedicaidplans.gov</a>.</li> </ul>
Important Dates	<ul style="list-style-type: none"> <li>• During open enrollment, changes to the beneficiary's health plan can be made as often as necessary. Open enrollment begins March 15, 2021 and ends May 14, 2021.</li> <li>• If a health plan is not selected by May 14, 2021, beneficiaries will be auto-enrolled in a health plan. <ul style="list-style-type: none"> <li>◦ Exempt beneficiaries will stay in NC Medicaid Direct.</li> <li>◦ Federally-recognized tribal members and IHS-eligible beneficiaries living in the 5-county region will be auto-enrolled in the EBCI Tribal Option.</li> </ul> </li> <li>• Health plan coverage begins July 1, 2021. Until then, beneficiaries should receive services the same way they do now.</li> <li>• After auto-enrollment, the DSS Director or Director's designee can contact the Enrollment Broker to change the individual's health plan until September 30, 2021.</li> <li>• Starting October 1, 2021, beneficiaries cannot change their health plan without a special reason until their recertification date. <ul style="list-style-type: none"> <li>◦ Exempt beneficiaries can change their health plan at any time.</li> <li>◦ Federally-recognized tribal members and IHS-eligible beneficiaries can change their health plan at any time.</li> </ul> </li> </ul>

**Enrollment  
Methods**

**Website:** [ncmedicaidplans.gov](http://ncmedicaidplans.gov) • **Mobile App:** NC Medicaid Managed Care •  
**Call Center:** 1-833-870-5500 • **Mail:** Address: P.O. Box 613, Morrisville, NC 27560 • **Fax:** 1-833-898-9655

*Benefit/coverage questions should be directed to the health plans.*